



Office of Charitable Gaming
P.O. Box 98502, Baton Rouge, LA 70884
(225) 925-1835 or (800) 562-9235 FAX (225) 925-7069

Application for Video Gaming Device Permit
****Please complete an application for each device.****

Please submit with every application:

1. A copy of the lease agreement with the Organization.
2. **Non-refundable \$600 permit fee.** Make check payable to Office of Charitable Gaming. In lieu of the entire annual payment, submit \$50 for the first month(s) and \$50 by the 15th of each month thereafter.

Please type or print all information.

Distributor			Distributor License Number
Physical Address (Street, City, State, Zip Code)			Distributor's Phone Number
Contact Person			Contact's Phone Number
Device Make	Device Model	Device Serial Number	Office Permit Number (if applicable)
Location of Device	Location Address		Location License Number
Authorized Representative (Print)	Signature of Authorized Representative	Date	Daytime Phone Number

Provide the name and license number of each organization leasing this device. You may use an attached list if necessary.

Organization	License Number

Do not write below this line. For office use only.			
Permit Number	Check Number	Amount	Receipt
Signature of authorized personnel			Date